

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO. **081951635** FILING DATE **10/17/97**  
APPLICANT(S) **KA70**

CLAIMS						
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
IND.	DEP.	IND.	DEP.	IND.	DEP.	
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						
51						
52						
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60						
61	1	1				
62		1		1		
63		2		2		
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69		1		1		
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TOTAL IND.						
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TOTAL CLAIMS						

**BEST AVAILABLE COPY**

PTO-1350 (3-70)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
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